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| ELECTION AND POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM | Application Number | 10/582,704 [U.S. National Stage of PCT/US2004/041970] |
| | International Filing Date | December 14, 2004 |
| | First Named Inventor | Maria Isabel Crespo Crespo |
| | Title | 2, 6 BISHETEROARYL-4- AMINOPYRIMIDINES AS ADENOSINE RECEPTOR ANTAGONISTS |
| | Art Unit | |
| | Examiner Name | |
| | Attorney Docket Number | 690068.601USPC |

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners at Seed IP Law Group PLLC, Customer Number: **00500**

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above (and any continuation/divisional applications therefrom), and to transact all business in the United States Patent and Trademark Office connected therewith.

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| City | | State | | ZIP | |
| Country | | | | | |
| Telephone | | Email | | | |

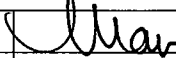
I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ As assignee of record of the entire interest I/we hereby elect, under 37 CFR 3.71, to prosecute the application to the exclusion of the inventor(s).

SIGNATURE of Applicant or Assignee of Record

| | | | |
|------------------------------------|---|------|---------|
| Signature |  | Date | 10/2/06 |
| Name | Margaret E. Valeur-Jensen, Ph.D. | | |
| Title and Company (Assignee) | Executive Vice President and General Counsel Neurocrine Biosciences, Inc. | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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| City | | State | | ZIP | |
| Country | | | | | |
| Telephone | | Email | | | |

I am the:

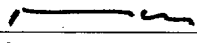
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Almirall Prodesfarma AG

SIGNATURE of Applicant or Assignee of Record

| | | | |
|------------------------------------|---|------|---------|
| Signature |  | Date | 10/5/06 |
| Name | Dr. H. Trachsler S. Frei | | |
| Title and Company (Assignee) | Members of the Board of Directors Almirall Prodesfarma AG | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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